The listing of claims presented below replaces all prior versions and listing of claims in the application.

## Listing of claims:

- 1. (Withdrawn) A method for the treatment of an individual having a condition characterized by abnormal myocardial cell Na $^{+}$ , K $^{+}$  or Ca $^{2+}$  ion levels, said method comprising administering a therapeutically effective amount of one or more  $\beta_3$  adrenoceptor agonists to said individual.
- 2. (Withdrawn) The method according to claim 1 wherein the condition is selected from the group consisting of heart failure, and myocardial hypertrophy.
- 3. (Canceled)
- 4. (Canceled).
- 5. (Currently amended) The method according to claim [[3]]  $\underline{13}$  wherein the  $\beta_3$ -adrenoceptor agonist is selected from the group consisting of arylethanolamines, aryloxypropanolamines, and trimetoquinols.
- 6. (Currently amended) The method according to claim [[3]]  $\underline{13}$  wherein the  $\beta_3$  adrenoceptor agonist is selected from the group consisting of BRL37344, BRL 26830, BRL 26830A, BRL 35113, ZD7114, CGP12177, CGP 12177A, CGP-20712A, CL316243, ICI07114, ICI215001, ICI 201651, BRL35135A, BRL28410, N-5984, (R)-N-[4-[2-[[2-Hydroxy-2- (pyridin-3-yl)ethyl]amino]ethyl]phenyl]- 4- [4-(4-trifluoro-methylphenyl)thiazol-2-yl] benzenesulfonamide (L-796568), (R)-N-[4-[2-[[2-hydroxy-2-(3-pyridinyl)-ethyl]amino]ethyl]phenyl]-1-(4-octylthiazol-2-yl)-5-indolinesulfonamide (L-755507), L-770,644, L-766,892, L-757,793, L-796568, LY-377604, Ro 40-2148, SB-220646, SB-226552, SB-251023, SB-262552, SR 58306, SR 58375, SR 58339, SR 58611, SR 58611A, SR 59119A, GR-265261-X, AD-9677, and agonists of the series 2-(3-indolyl) alkylamino-1-(3-chlorophenyl)ethanols.

- 7. (Currently amended) The method according to claim [[3]]  $\underline{13}$  wherein the  $\beta_3$  adrenoceptor agonist is BRL37344.
- 8. (Currently amended) The method according to claim [[3]]  $\underline{13}$  wherein the  $\beta_3$ -adrenoceptor agonist further comprises  $\beta_1$  antagonist activity and/or further comprises  $\beta_2$  antagonist activity.
- 9. (Currently amended) The method according to claim [[3]]  $\underline{13}$  further comprising administering one or more  $\beta$  blockers to said human.
- 10. (Original) The method according to claim 9 wherein the  $\beta$  blocker is nadolol.
- 11. (Original) The method according to claim 9 wherein the  $\beta$  blocker is a  $\beta_1$  and/or  $\beta_2$  adrenoceptor antagonist.
- 12. (Previously presented) The method according to claim 9 wherein the  $\beta$  blocker is administered to said human prior to, simultaneously with or subsequent to administration of the one or more  $\beta_3$  adrenoceptor agonists.
- 13. (Currently amended) The method according to claim 3 A method for the treatment of a human suffering from chronic symptomatic heart failure with impaired systolic left ventricular function, said method comprising administering a therapeutically effective amount of one or more  $\beta_3$  adrenoceptor agonists to said human wherein said human is suffering from chronic heart failure and further comprising at least partially stabilizing said human prior to administration of said  $\beta_3$  adrenoceptor agonist.
- 14. (Original) The method according to claim 13 wherein said stabilizing comprises treatment with one or more compounds selected from the group consisting of ACE-inhibitors, aldosterone antagonists and β-adrenoceptor antagonists.
- 15. (Withdrawn) A method for treatment of a condition characterized by abnormally high

myocardial cell Na+ ion level, said method comprising administration to an individual having said condition of a therapeutically effective amount of one or more  $\beta_3$ - adrenoceptor agonists.

- 16. (Withdrawn) The method according to claim 15 wherein said condition characterized by abnormally high myocardial cell Na<sup>+</sup> ion level is selected from the group consisting of heart failure, myocardial hypertrophy, and diabetic cardiomyopathy.
- 17. (Withdrawn) Use of one or more  $\beta_3$  adrenoceptor agonists for the manufacture of a medicament for treatment of an individual having a condition characterized by abnormal myocardial cell Na<sup>+</sup>, K<sup>+</sup> or Ca<sup>2+</sup> ion levels.
- 18. (Withdrawn) One or more  $\beta_3$ -adrenoceptor agonists for use in the treatment of an individual having a condition characterized by abnormal myocardial cell Na<sup>+</sup>, K<sup>+</sup> or Ca<sup>2+</sup> ion levels.
- 19. (Withdrawn) Use of one or more  $\beta_3$ -adrenoceptor agonists for the manufacture of a medicament for treatment of an individual suffering from or susceptible to heart failure or myocardial hypertrophy.
- 20. (Withdrawn) One or more  $\beta_3$ -adrenoceptor agonists for use in the treatment of an individual suffering from or susceptible to heart failure or myocardial hypertrophy.
- 21. (Withdrawn) A pharmaceutical composition for use in the treatment of an individual having a condition characterized by abnormal myocardial cell  $Na^+$ ,  $K^+$  or  $Ca^{2+}$  ion levels, the composition comprising one or more  $\beta_3$  adrenoceptor agonists together with one or more pharmaceutically acceptable adjuvants, excipients and/or carriers.
- 22. (Withdrawn) A pharmaceutical composition for use in the treatment of an individual suffering from or susceptible to heart failure or myocardial hypertrophy, the composition comprising one or more  $\beta_3$  adrenoceptor agonists together with one or more pharmaceutically acceptable adjuvants, excipients and/or carriers.

- 23. (Withdrawn) A pharmaceutical composition comprising one or more  $\beta_3$  adrenoceptor agonists and one or more  $\beta_1$  and/or  $\beta_2$  adrenoceptor antagonists, together with one or more pharmaceutically acceptable adjuvants, excipients and/or carriers.
- 24. (Withdrawn) A method for the extrusion of Na<sup>+</sup> from a myocardial cell or cells, the method comprising contacting said cell (s) one or more  $\beta_3$  adrenoceptor agonist(s).
- 25. (Withdrawn) The method according to claim 24 wherein said method comprises Na,K pump stimulation.